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## FACSIMILE TRANSMISSION COVER SHEET

Date:

March 23, 2007

To:

United States Patent and Trademark Office Examiner: Wong, Allen C.; Art Unit: 2621

Fax:

571-273-8300

Re:

Application Serial No.: 10/655,698

Filing Date: September 5, 2003; First Named Inventor: Viscito, Eric

Attorney Docket No.: 02CON382P-CIP

From:

Farjami & Farjami LLP

Number of pages including the cover sheet: 17

## Message:

Enclosed please find an Amendment and Response to the Non-Final Office Action dated January 23, 2007; and a Terminal Disclaimer. Authorization is hereby given to the Director to charge \$130.00 to Deposit Account 50-0835 as payment for the Terminal Disclaimer Filing Fee.

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		Application Number	10/65	5,698			
TRANSMITTAL		Filing Date	9/5/2003		R	CEI	VED
FORM		First Named Inventor	Viscito, Eric				X CENTER
(to be used for all correspondence after initial filing)		Examiner Name					
		Art Unit	2621 WA		MA	K Z	<b>3</b> 2007
Total Number of Pages in This Sub	omission 16	Attorney Docket Number	02CO	N382P-CIP			
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X Fee Transmittal Form		Drawing(s)		After Allowance commun to Group	lcation		
Fee Attached		Licensing-related Papers		Appeal Communication to of Appeals and Interference			
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under 37 CFR 1.52	or 1.53						
	SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
Farshad Farjami, Esq., Reg. No. 41,014						·	
Individual name Farjami &	Farjami & Parjami, PLP.						:
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Effective on 12/8/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	.Application Number	10/655.698	RECEIVED				
FEE TRANSMITTAL	Filing Date	9/5/2003 CEN	RAL FAX CENTER				
	First Named Inventor		MAR 2 3 2007				
For FY 2007	Examiner Name	Wong, Allen C.	HAR D D LOO!				
Applicant Claims small entity status. See 37 CFR 1.27	Art Unit	2621	1				
TOTAL AMOUNT OF PAYMENT (\$) 130.00	Attorney Docket No.	02CON382P-CIP	]				
METHOD OF PAYMENT (check all that apply)			]				
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X Deposit Account Deposit Account Number: 50-0835	Deposit Account Name:	Conexant Systems, Inc.					
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authorization on PTO-2038. FEE CALCULATION	·:		4				
1. BASIC FILING, SEARCH, AND EXAMINATION FEES			-l				
FILING FEES SEARCH FEES	S EXAMINAT	ION FEES	1				
Small Entity Small En		all Entity					
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Reissue 300 150 500 250		300					
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2. EXCESS CLAIM FEES	0	Small Entity					
Fee Description		Fee (\$) Fee (\$)					
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Each independent claim over 3 or, for Reissues, each independent cla							
Multiple dependent claims	(4).	360 180					
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HP = highest number of independent claims paid for, if greater than 3	<del></del>						
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper, the appl							
for each additional 50 sheets or fraction thereof. See 35 U.S.C.			1				
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Non-English Specification, \$130 fee (no small entity discour							
Other: Terminal Disclaimer (Fee Code: 1814/2814)	:						
SUBMITTED BY			<b>i</b>				
Signature Registratio (Attorney/Ag		Telephone (949) 282-1000	1				
Name (Print/Type) Farshad Farjami, Esq.	Date 3/2 3/017	1					
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